

# Anonga won Aninis epwe Nonnopok

Oregon mei wanong tingorun ngeni ewe muun federal an epwe kawor ew sokkun aninis pwe epwe awesano me kewe ese wor masowan fan iten chon fiti ewe Oregon Health Plan (OHP) non unusen ei state. Ika mwo Oregon mei unusen mochen angang ngeni an pwe kukununo niwinin pekin health care non unusen ei state ewe mei anisi kukununon monien federal mei tou me pwan eochueno met ewe mei eoch ngeni nonnomwun, met murimurin angangen pekin health mei fis mei sakopat pwokiten ian re feito me ian me pwan iir seni meni mwiichen aramas. Iwe pwan sopwosopwun, met kewe mei fis pwe epwe eochueno ewe angang ese mwo naffeoch ngeni an epwe angang won met mei fis pwokiten angangen pekin health ese nonnopok seni ewe system mei anongonong won ian aramas re feito me ian me kopwut. Fiti ngeni, usun met masowen ewe echiechi fengen an federal me state, Oregon mei wanong tingorun ngeni CMS pwe repwe awora ew angangen aninis seni federal non ekkewe community epwe nenengeni an epwe eukatiw sokkun angangen pekin health ese nonnopok ngeni ekkewe chochon non OHP. Oregon mei mochen pwe ekkewe aninis me non community ina met epwe eochueno met nonomwun pekin health ngeni ir ekkewe mei napengeni ar mefi osupwangen an ese nonnopok angangen pekin health,<sup>1</sup> me pwan nengeni met epwe anisi met kewe mei fori an epwe watteta nonnomwun pekin health. Ir me ruw ekkei mettoch minne epwe eochueno epwe tongeni fori an epwe kukunutiw niwin epwe anisi state me federal.

Oregon mei pwan sopweno an tingor pwe ewe coordinated care organizatin (CCO) epwe fori an epwe nengeni pekin health ese nonnopok pwe epwe affat pwe ina met masowen ekkewe claim ren medical ika ina met epwe eochueno niwin me non ewe koukun niwin ren unusan fan iten chok an epwe afateno ifan ewe kouk, pekin pwachetin, me pwan ewe medical loss ratio (MLR). Ei tingor mei tongeni seni ewe Oregon State Legislature (HB 3353)<sup>2</sup> non July 2021. (Nengeni ewe *Value-based Global Budget* met masowen taropwen ren tichikin pworoussa won ei tingor mei tonong.)

1. Ew minafon aninis seni federal mei nengeni an epwe eochueno nonnopokun angangen pekin health, pachenong metekewe ir mei angang faniten ren ar repwe fori ekkewe neni repwe anisi

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<sup>1</sup> Ekkei chochon arams me communities ir mi osupwangeno murimuriton ekkewe angang ese wor pwipwioch me ennenepeu aramas me inetin aramas ren pekin safei, aninnisir ar repwe fengino achok seni nomw tori ikenai mi chok fifis. Ekkei tettenin aramas ir chochon ewe einangen rewiniwos won ei fenu Merika chon Intian ar kewe community; Latino/a/x, mi chon/Mi chon ra upw Merika, chon Saini (Asian), Pacific Islander, American Indian/ReWinipwos non Alaska, ekkewe ekkoch community in mi kono winikiniw rese pwech; aramas mi mwek; aramas rese kon sinei fosun Merika; me chon pecheseset me chon su seni fenuwer fan iten mi wor mwaun me efeingaw.

<sup>2</sup> <https://olis.oregonlegislature.gov/liz/2021R1/Downloads/MeasureDocument/HB3353/Enrolled>

angangen pekin health an epwe nonnopok; anisi ekkewe angangen an community ren pekin health mei nonnopok me pwan non unusen an state; awora sokkun aninisin nongonong mei fis ren angang fengenin community pwe pwe tongeni anisi nonnopokun angangen pekin health.

An epwe tongeni fis angangen ekkei aninis meren federal **Oregon mei wanong tingorun ekkei pochokunen nemenemen nounoun ewe aninis:**

2. Pochokunen nemenem won met repwe nounou ewe aninis ngeni ren an epwe fori pwe met ewe an federal mei taitap ngeni met moni epwe kamotiw ngeni Medicaid mei nounou ngeni met kewe Social Determinants of Health (SDOH) ren ekkewe chochon OHP ir mei fen piin nomw non ewe nikinik ren an wor ekkesiwin ngeni nonnomwur ika an wor met mei fisita pwe epwe osukosuka nonnomwur usun mei awewetiwi non ewe *Eochuweno Met Mei Fis Pwokiten Angangen Pekin Health ren an epwe Eoch Ngeni Manaw me met Ekkesiwin non ewe Coverage* masowen taropwen.
3. Pochokunen nemenem ren ar erpwe aneani met aninis ngeni CCO non angangen pekin health ese nonnopok meren ewe HB 3353 me pwan awewetiwi me non ewe *Eochuweno Met Mei Fis Pwokiten Angangen Pekin Health ren an epwe Eoch Ngeni Manaw me met Ekkesiwin non ewe Coverage* masowen taropwen ren ekkewe claim ren pekin safei ika angangen aninis mei eochueno nounoun ewe aninis pwokiten met an ekkewe CCO kouk.

Ren unusen ekkewe anapanapen angang mei katonong, kose mochen katon me non page 8.

## Osukosuk me porousan

### Angangen pekin health ese nonnopok

Porousen an aramas health ese fisita ren met sokkun aninnisin safei mei kawor ngenir nge ren porousen nonnomwur, aweve ren nenier me ia re nonom ia, kaworen mwongo mei faitamiin ngenir, fengen me ar angang me nour mwoni.<sup>3</sup> Ekkewe aramas mei sakono onuwen unucher me ekkewe ir mei nonnomw non ekkewe neni mei kisikis anen moni tonong ir ekkewe ekan napengeni ar repwe nomw non ekkewe neni mei efeiengaw, ekkewe imw ese kon nikinikeoch, ese wor met repwe tongeni fiti, ewe system ren pekin kopwungun mei armasangaw, me pwan ekkewe sukun ese kon kan nikinikieoch, wewen pwe a mechres an epwe fis met mei kon ngaweseni ekkei, me pwan mwochomwochonon koukun manawen aramas.

Ren an esapw fis ei sokkun afeiengaw, Oregon mei mochen an epwe wor ew angangen nenengneoch ren an ese kawor tumwunun health ngeni ese nifinifin, tumwunun an aramas me nour tokter tufich, me tumwunun an epwe kawor ngeni aramas aninnisin tumwuneoch. Ekkewe angangen pekin health ese nonnopok mei tongeni ach sipwe kuta fetanin ngeni tourengawen aninis ngeni pochokunen nemenem, nongonogun, aninisin nongonog, met sokkun epwe tongeni anisi me fateno pwe ina pwungunon kokkot seni ekkewe tappin aramas, ekkewe aramas, met mei fis me mwan fan iten ir chon ian me ar mochen nemenir, nemenemen nonnomwun aramas ese pwung, ese pwung nonnomwun armas, nifinifin ngeni ion, ewe angangen osukosuka emon me nonnomwono ian ewe a fen nonnomw ian. Ekkewe community mei wor aramas mei sakono onuwen unucher non me ekkewe community ren Tribal ir ra fen piin

### An Oregon awewen nonnopokun

Oregon epwe tongeni forata ew an system ren pekin health ewe epwe fori pwe angangen pekin health epwe nonnopok ngeni an aramas repwe tongeni tour ngeni aninisin health me aninisin inisir nge esapw wor an epwe pekingaw ngenir ren fan iten ir seni meni mwichen aramas, ian re feito me ian, foos ir mei kapas non, tufichingawen an inisir tongeni, nefeongur, sokosokun inisir, ika ir mwan ika fefin, nonomwun ar tufich, nonomwun ekkei community ika pusin ir, ika pwan ekkoch sokkun mettoch epwe forata nikininin nonomwun aramas.

An epwe pwonueta nonnopokun angangen pekin health mei auchea epwe sopwosopwono angang fengen me non meinisin ekkewe neni me kinikin me non ewe state, pachenong ekkewe mwuun tribal pwe repwe tongeni pworous won:

- An epwe nonnopok inetin ika inet sefanin aninisin nongonong me nemenem; me pwan
- Sineni, me fori angangen etipeew me opwungusefani met a fen piin fifis me met mei fis pwokiten angang ese pwung.

<sup>3</sup> Magnan, S. (2017). Social Determinants of Health 101 for Health Care: Five Plus Five. National Academy of Medicine. Available at: <https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/>

sapeseni soddun angang ese pwung, mei forata an epwe napeno met mei osukosuka nonomwochun angangen pekin health me pwan angawano ekkewe mettoch mei fis pwokiten pekin health nap seni ekkewe ir mei pwechepwech. Ekkei angang ese nonnopok mei pwan fis an epwe aweiresano aninisin mwoni. Ew kouk pwe 31% ren met mei kamotiw ngeni pekin medical care mei feito seni angangen pekin health ese nonnopok pwokiten a chok ina met masowen won system mei fis ren ar nengeni ian ekkewe aramas re feito me ian me angangen kopwut.<sup>4</sup> Ewe Assesment non 2018 ren ewe Oregon State Health T<sup>5</sup> mei kuna pwe ekkei mettoch mei fis pwokiten ese nonnopok angangen pekin health me met mei forata an epwe angawano:

#### *Osupwang me tumwunungaw ngeni pekin mongo*

- Arapakan meinisin soddun mwiichen aramas me mwiichen aramas seni ian er feito me ian me non Oregon ir ra fen piin kuna ekkei watten koukun an aramas osupwang nap seni me non ei United Sates usun ir chok ew, akakewin ngeni ekkew aramas ir me affat pwe chon African American.
- Oregon mei nomw non tetenin 44 non unusen ei fonu ren nafangawen mongo. Osupwangen mongo mei kon watte me non ekkewe community won sopw, community ren aramas mei sakono onuwen unucher, imw mei wor semirit non, me pwan ekkewe ir rekan rent imwer.

#### *Pekin imw me osupwangen imw*

- Ew-ne unungat ren meinisin imwen ekkewe ir African American ir mei nouni nap seni ukukun 50% me non ar moni tonong ren niiwinin imw, anonno ngeni 17% ren imwen meinisin non ewe state.
- Non ewe 2010 ina epwe chok 32% chon African American non ekkewe kukkun sopw non Oregon ir mei pusin nomw non imwer, nge 60% ukukun ekkewe aramas mei pwechepwech mei nomw non ei sopw.
- Fiti an ese pwan kapachenong ekkewe aramas mei affat pwe ir chon Asia, aramas mei mefi sakonon nikinik pwokiten ese wor imwer non ew kinikinin fansoun nap seni met ir mei fen pusin kuna meren ekkewe ekan tutumwunur.

#### *Imwen Fotek*

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<sup>4</sup> <https://journals.sagepub.com/doi/pdf/10.2190/HS.41.2.c>

<sup>5</sup> <https://www.oregon.gov/oha/PH/ABOUT/Documents/sha/state-health-assessment-full-report.pdf>

- Me Non Oregon, ekkewe aramas ir mei sakono onuwen unucher ir napengeni rekan anapano chochon non ewe imwen kanopwus nap seni people of color are more likely to be incarcerated than white people:
  - Ukukun chon African American ir ina epwe 4.6 omw kopwe ne chok nonnomw chok
  - Ekkewe Native American ir nap seni 1.8 fansoun inet chok
  - Aramasen Latino/a/x ir mei nap ngeni 1.4 fansoun inet chok

## COVID-19

Ewe COVID-19 pandemic mei pwaraa met kewe angangen pekin health ese nonnopok mei chok fis me non Oregon me pwan fis pwe ina met epwe anisi ngenir ar repwe amasowa met watten mettoch mei fis an epwe anisi pwangenon tufichin aninis.

- Ekkewe chon Oregon ir Hispanic ra awora tingorun an ewe chok 12% of seni ekkewe kinikinin mwiichen aramas nge resapw tupwuni nap seni ukukun 18% ren ekkewe ir mei wor rer COVID-19.<sup>6</sup>
- Ekkewe chon Oregon ir mei Chon ina repwe ukukun 3.1 mei tongeni epwe wor rer COVID-19 fengen me niuing non pioing nap seni ir ekkewe mei pwechepwech.<sup>6</sup>

## **Met aninis mei kawor fan iten nonnopokun angangen pekin health mei kawor seni ewe Anepwung**

Non ewe July 2021, ewe Oregon Legislature a passini ewe HB 3353 (nengeni Appendix A), ewe mei aucheani ekkewe CCO ar repwe:

- monatiw ukukun 3% me non nour we budget ren unusan won prokramen me aninis met epwe eochueno nonnopokun angangen pekin health, *me pwan*
- epwe wor omw kopwe fori wiisom ngeni ekkewe community.

An epwe anisi met auchean pwapwun ei otutun, fan nurun ei 1115(a) mei pwarano ewe taropwen waiver ren ekkesiwin sefan wewen OHA epwe wisan ne fori sokkun tingor epwe no ngeni CCO ukukun 1/3 me non ekkei aninisin moni (ina epwe ukukun 33% me non ewe 3%) ren an epwene tou kapasan meren ewe minafon angangen aninis non commuity me pwan ekkoch sokkun aninis mei menei angang fengen non. Nge met a kon auchea, ei taropwen tingor a foruta me non ewe Oregon Regional Health Equity Coalition (RHEC) pwokien seni an ese chiwen nonnopok ikkena met mei wor mei afatetiwi me faan.

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<sup>6</sup> OHA Weekly COVID-19 Report, September 29, 2021. <https://www.oregon.gov/oha/covid19/Documents/DataReports/Weekly-Data-COVID-19-Report.pdf>

Sopwosopwonon, ewe onnuk mei tou seni ewe anepwung mei aucheani an OHA epwe kutta ketiwan meren ekkewe CMS ekkewe 3% me ren ewe koukun nongonogun ach sipwe moni meren CCO ewe epwe fan iten eochueno nonnopokun angangen pekin health, me pwan ekkoch sokkun angangen moni mettoch mei annei pwe ikena met mei kamotiw fan iten eochueno angangen pekin health met epwe kamotiw fan iten koukun aninis) ren sopwosopwun nengeni ewe ewe *Value-based Global Budget* taropwen masowan).

*Mongungu seni ekkewe community non an CCO finata kokkot*  
Ew wosen masowen an Oregon kewe CCO repwe forata ewe mongungu an community ngeni an CCO finata kokkot, ewe aramasen Oregon ir mei nukuw pwe epwe kanapeno ngeni ekkewe mwiich ir mei pwoputa me non community ewe repwe nenengeni ukukun chochon aramas me ekkewe community ir ra fen piin mefi osupwang ren angangen pekin health ese nonnopok ngenir.

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*“Iwe pwan ion epwe tongeni tufichin epwe pworousei met mei menei epwe fis non ewe community me nukun pusin ewe community?”*

*-Met memef seni community ren an OHA Kokkot won Ifan Angangan*

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*Ewe coalition ren angangen pekin health ese nonnopok me non ekkewe kinikin*

Non 2011, ewe RHEC a tori OHA fiti an wanong an tingor ren ewe 1115(a) ewe angangen siwini sefani ewe waiver, me pwan angange fengen me ewe anepwung non Oregon ar repwe pworous won napanapen ewe HB 3353. Soposoponon, meinapen OHA me RHEC ra angang fengen ar epwe forata ewe ekiek me non ewe HB3353 me pwan anapano murinon ngeni community ren ar apochokuna wiisen community non ar kuna metekewe ese nonnopok me angangen aninis mei fis nge ese nonnopok angangan.

Chon RHEC, ir mei nomw fetan seni ukukun 300-500 organization, ir chon emweni ekkewe sakopaten mwiich ren angangen apochokuna nononmwochun aramas, ren non eoreni me pwan sokkun mettoch mei epwe anisi metewe ese nonnopok ren angangen pekin health me nonnomwun aramas non Oregon. Ew masowen ar angang mei pachenong anisi sakkopaten community ar repwe anapano ar epwe tufichin angang fengen me ekkewe chon wiisen finata kokkot, CCO, me pwan ekkoch sokkun system ren pekin health pwe repwe tongeni kuna metewe mei fis ese nonnopok ren onnuk, system me met mei ekkesiwin me non ekkewe neni minne mei fis pwe ina met epwe eppet i ekkewe community ar repwe tongeni unuseoch ne tour ngeni koukun aninis ngenir non pekin health.

Ewe OHA/RHEC workgroup re mwiich fan 12 nefinen ewe May me July 2021 ar repwe forata met sokkun ar omwokut epwe tongeni anisi ngenir anapanapen ar repwe ekkesiwini pochokunen nemenem

me anisisin nongonong ngeni community. Ach apareni pwe ewe nikinikin angang mei auchea usun pwan euclean uwaan ewe angang, ewe angang mei pachenong ar repwe forata angangen nukunuk nefiner, akkaewin ar repwe fori pwe epwe napeno nukunuk nefinen ekkewe organization non community me mwuun, afatano ekkoch mettoch mei auchea mei wor rech non ach fori angang fengen ren an epwe wor etipeew nefinen ekkewe mwiich, anisis fengen won met mei menei epwe fis pwe epwe tufichin pwonueta ewe angang fengen, afataeochu wiisen me koukun angang, me pwan tipeew fengen won met kewe sokkun ourour epwe fis pwe ina met ewe anapanapen angang epwe fis fan itan ren an epwe pwonueta angang epwe nonnopok, pachenong anisis epwe wor fan iten ekkewe community ir mei kuna anisingaw pwokiten seni ian re feito seni ian me ar eoreni.

#### *Council ren chon anisis non pworous ngeni community*

Seni non 2012, ewe statute mei aucheano pwe ew me ew ekkewe CCO repwe pwoputani me anganga ew community advisory council (CAC) an epwe wisen nenengeni an ekkewe CCO community health assessment (CHA) me pwan community health improvement plan (CHP) me pwan fori pwe angangen pekin health fan iten aramas me community mei wor ar repwe anganga. Ina epwe ukukun esopw me non ew me ew ekkewe CAC membership repwe member non CCO.

Ekkewe CCO ir mei pwan wor pesepes ngenir ren pekin moni ar repwe echiechi fengen me chon pukutan ekkewe neni, ekkewe tichikin organization me community, usun ren ewe Oregon's Regional Health Equity Coalition (RHECs) (nengeni Appendix A). Me fan ewe saingon angangen procurement an CCO, Oregon mei fori an epwe apochokuna ewe CAC non met wisan me anapano an epwe wor tupwun community me achomongano non ewe CAC. Iwe nge, CAC mei chok pusin nomw pwe ir committee ar repwe awora anisis non pworous ngeni ekkewe CCO, fiti sakopaten mettoch epwe anisi ngeni ar kokkotun finata mettoch.

#### *Angangen investment non Community*

lei, Oregon epwe wanong tingorun ngeni an federal kewe anisis non community ewe mei fis fan awenewenen anisisin angangen pekin health epwe nonnopok. Oregon a fen foratiw met ar angang repwe pwoputa won ren an epwe anisi ei omwokutun angangan: HB 3353 ewe mei fis fan iten an epwe anisi community pwe repwe tongeni angei och anisisin moni seni ewe Medicaid pwe epwe anisi angangen pekin health me metekewe mei fis ren nonnomwun aramas minne mei forata an esapw wor nonnopok non angangen pekin health.



Fiti ngeni ei angangen onnukun, Oregon, me non an angang fengen me ewe community an RHEC, a forata ew prokram epwe pwoputani ren an epwe fori me awora minafon aninisin nongonong ngeni ewe community investment collaborative (CIC). Ekkei chiechier mei kawor me non community repwe nenengeni ukukun chochon aramas me ekkewe community ra fen piin torir osukosukenan me mwan me iei ren angangen pekin health ese nonnopok, pachenong nge ese pwan kouk ren an Oregon kewe tiuw tribe mei affat meren federal me pwan ekkewe community an Tribal; chon Latino/a/x, ekkewe mei Chon/African American, chon Asia, chon fonuwen non Pasific, me chon Indian/Wosetan Chon Alaska, me pwan ekkoch aramas rese pwechepwech; aramas mei wor apwangapwangen inisir; aramas rese kon sinei fosun Merika, me chon etto nonom Merika me chon su seni fonuwer.

Non ach nenengeni ekkei mettoch minne mei forata an esapw wor nonnopokun angangen pekin health ewe mei fis fan iten epwe cheche ekkewe mei pwech ina met ei minafon omwokut ren ewe pekin health, RHEC, me pwan ekkewe community mei wor ar organization (CBO), pachenong ewe pekin social service me pwan ekkewe tichikin organization mei wor ren pekin eoreni, ikena met a fen piin fis pwe epwe anisi an esapw napeno angangen pekin health ese nonnopok me pwan nenengeni usun nonomwun aramas ren pekin health. An ekkewe CCO ra sopwosopwono ne anapano ar angang ar repwe nengeni metekewe an ekkewe chochon non OHP osupwang, ewe angangen pekin health ese nonnopok me pwan me kewe angangen nonnomwun chon ekkewe community ren pekin health, ina met mei auchea ngeni an Oregon epwe awora aninis ren ekkewe CBO mei nafangaw aninis ngenir usun ir ewe pochokunen chon emweni ewe angangen aninis fengen pwe epwe fetaneoch.

### Angangen saving an federal

Oregon a fen piin angang won an epwe tumwunuw pekin health ren niiwin ngeni Medicaid me pwan ren unusan. me fan nurun ewe angang epwe for sefan seni non 2012 me 2017, Oregon mei wanong unusen an angang ngeni an epwe ekisano ukukun per member per month (PMPM) ren met Medicaid epwe monatiw ren ewe kouk ina epwe won ukukun ruw pesen seni ewe mei afateteiw me non an national kouk 5.4% ngeni 3.4%. Ngeni iei, Oregon a fen fetaneoch won an epwe fori metei ii mei angang fan itan, me pwan an epwe chok anomwano ewe ukukun niiwin usun ina met state mei anomwu pwe akkaewin an kokkot. Oregon a fen tori ewe kouk meren ekkewe minafon angangen ekkesiwin ngeni ewe system ren pekin health, an CCO, ewe meiawora ninisin pwe epwe tongeni nomwono chok won ewe koukun angangen aninis ren pekin health mei murino nge ekis me ekis amangano fetanin an epwe watteta niiwinin.

Non 2021, Oregon mei anapano ei anapanapen angang, ewe mei fis non unusen ei state an epwe eochueno ewe niiwin ren pekin health care an esapw watteta me non meinisin neni. Ei angang epwe fori an epwe pineiano ewe per-capita non ew ier fan iten wattenon niiwinin pekin health care non unusen ei



state ngeni 3.4% ren non 2021-2025 me 3.0% ren 2026-2030. Oregon mei pwarano ukukun watten mwoni mei savino non unusen ekkewe market. Oregon mei tongeni epwe nukueno ukukun \$19 billion non monien Medicaid, Medicare, me pwan ekkoch sokkun niwinin health care non ekkei 7 ier, usun mei pwano non ewe Ningos 1.

Ren an ekisano met mei kamotiw fan iten ekkewe health plan, ei prokramen niwin ren health care mei tongeni forata an epwe kisitiw niwinin premium, pachenong ekkewe non Nenien amomo, feita ngeni pwan ekkoch ren federal won ewe Advance Premium Tax Credits.

Saingonon, Oregon mei wor ren ewe watten kinikinin chon nounou Medicare non ewe Medicare Advantage plan – 47% non Oregon ngeni ukukun 38% non unusen ei fonu. Pwokiten ewe minafon angangen nounoun moni mei fis ren unusen kinikinin nenien amomo, ewe mwuun federal mei tongeni pwe epwe kuna met pwan sopwosopwun moni ese nounouno ren ewe Medicare Advantage plan ngeni ewe mwuun federal.

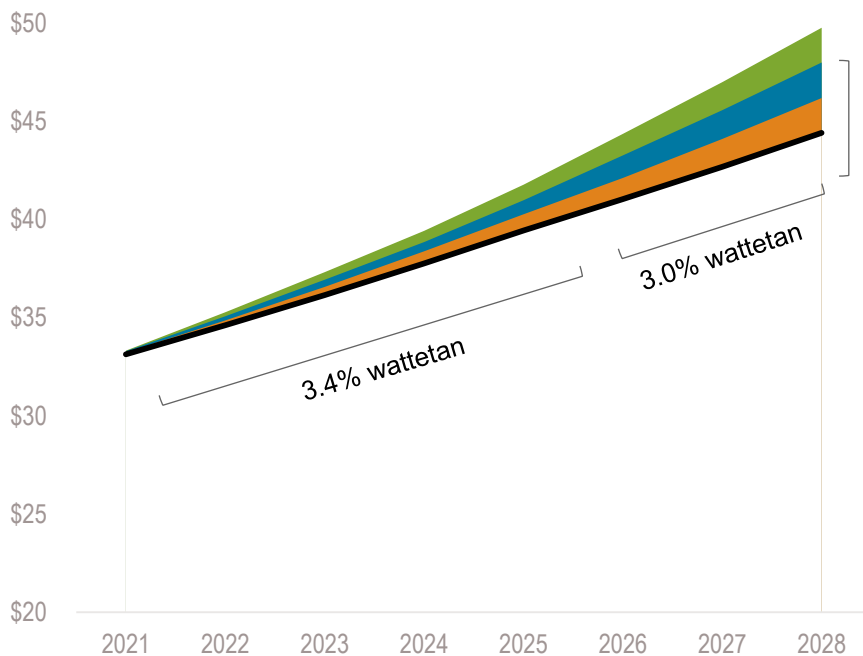
Ningos 1

**An Oregon Cost Growth Target mei tongeni esapw nounano ukukun \$19 billion non Medicaid, Medicare, me ekkewe mei kamo niwinin health care non ukukun 7 ier.<sup>7</sup>**

Mwoni mei nomw non billion

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<sup>7</sup> Ian e etto me ian porausen Data: CMS National Health Care Expenditures



Met mei pwano iei ren mwoni mei tou, nge ese pwan wor ewe cost growth target, non **met mei kamo** pachenong (Nenien Amomo), **Medicare**, me **Medicaid**.

Ewe nain mei chon mei pwarata met mei watteta ren ewe cost growth target.

## Affaten angangan

Ren Oregon an epwe pwoputani ne opwungu met kewe mei fis me mwan me met mei fis iei ren angang ese pwung ewe mei feito seni angangen pekin health ese nonnopok, sipwe pwoputa ne fori met minafon me nengeni met ewe aninis me nukun ewe nenien pekin health care. Ekkei aninis mei auchea repwe pwan tongeni siwini ewe pochokunen finata me ekkewe aninisin nongonong ngeni ar repwe no ngeni ekkewe community ir mei kon mefi weiresin ewe angang ese pwung ngeni nonnomwun aramas.

Fiti aninis meren CMS, Oregon mei tongeni anapano angangen aninis non ewe angangen pekin health ese nonnopok me pwan pochokun ne aninsi ekkewe anapanapen angang mei nomw non ekkewe community non unusein ei state. Oregon mei mochen pwe ekkewe aninis me non community ina met epwe eochueno met nonomwun pekin health ngeni ir ekkewe mei napengeni ar mefi osupwangen an ese nonnopok angangen pekin health, me pwan nengeni met epwe anisi met kewe mei fori an epwe kukunutiw ewe niwin ren state me ewe mwuun federal.

**Oregon mei wanong tingoron ewe minafon aninis an federal epwe anonga won an epwe eochueno nonnopokun angangen pekin health, pachenong, mwonien:**

1. an epwe foruta neni epwe awora aninis ngeni an epwe nonnopok angangen pekin health

2. aninis ngeni ekkewe mwokutukut mei fis me non community ren nonnopokun angangen pekin health
3. mwutata an epwe wor aninisin nongonong me non community ren ar repwe fori an mwokutukutun aninis ngeni ewe nonnopokun angangen pekin health.

An epwe tongeni fis angangen ekkei aninis meren federal Oregon mei wanong tingorun ekkei pochokunen nemenemen nounoun ewe aninis:

- a. Pochokunen nemenem won met repwe nounou ewe aninis ngeni ren an epwe fori pwe met ewe an federal mei taitap ngeni met moni epwe kamotiw ngeni Medicaid mei nounou ngeni met kewe Social Determinants of Health (SDOH) ren ekkewe chochon OHP ir mei fen piin nomw non ewe nikinik ren an wor ekkesiwin ngeni nonnomwur ika an wor met mei fisita pwe epwe osukosuka nonnomwur usun mei awewetiwi non ewe *Eochuweno Met Mei Fis Pwokiten Angangen Pekin Health ren an epwe Eoch Ngeni Manaw me met Ekkesiwin non ewe Coverage* masowen taropwe.
- b. Pochokunen nemenem ren ar erpwe aneani met aninis ngeni CCO non angangen pekin health ese nonnopok meren ewe HB 3353 me pwan awewetiwi me non ewe *Eochuweno Met Mei Fis Pwokiten Angangen Pekin Health ren an epwe Eoch Ngeni Manaw me met Ekkesiwin non ewe Coverage* masowen taropwen ren ekkewe claim ren pekin safei ika angangen aninis mei eochueno nounoun ewe aninis pwokiten met an ekkewe CCO kouk.

## 1. Awora aninis non ekkewe mwoni seni federal ren ekkewe neni an epwe anisi nonnopokun angangen pekin health

- a. **Aninis ne fori an epwe napeno ar tufichin anganga ekkewe angangen pekin health an epwe nonnopok ren aninisin monian**

Oregon mei wanong tingorun ngeni an federal we monien aninis an epwe anisi ewe angangen anapano tufich me tongeni ren ekkewe community investment collaboratives (CIC) me pwan anapano ar tufichin repwe fori me tumwunwuw ewe watten kinikinin non ewe angangen aninis.

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*“Ekkewe aramas ion ra fen fofori ewe angang me ra fen piin fori ewe angang non fansoun nakatam... **Ese pwan menei pwe epwe wor minafon kokkot ren nikinkin ewe angang.** Ai nukuw pwe mei menei an epwe uweifengeni meinisin ngeni ewe chepen iokewe ra fen wor ar kokkot ren an epwe, “Iwe, ifan usun ach sipwe anisi kemita iokewe ouwa fen nukanapen fori ewe angang?” **Ai nukuw ewe angang OHA mei tongeni epwe fori usun ewe insitution mei kapas fan iten ekkewe organization ir ra fen nomw won fori ewe angang.**”*

*-Met memef seni community ren an OHA Kokkot won Ifan Angangan*

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Ika mwo Oregon mei ekieki pwe ekkewe CIC repwe fiti ngeni metewe an ekkewe organization ra fen fori me pwan met mwokutukut non chommong community, non ennetin iwe ekkewe CBO ir mei naffangaw met aninisin nongonong mei wor rer esapw usun ekkewe organization won pekin health care. Ekkoch state me community ra fen kuna pwe mei namwot an epwe kawor ewe aninis ngeni an epwe napeno monien aninis me ekkewe aninisin nongonong ngeni ekkewe CBO pwe repwe tongeni angang fengen me ekkewe organization ren pekin health care.<sup>9</sup>

**b. Aninisin nongonong ren neni non unusen ei state an epwe anisi mwokutukut mei fis meren community won ewe aninisin angang epwe nonnopok**

Pwan sopwosopwun an epwe no ngeni ewe aninis an federal fan iten ekkewe CIC, Oregon mei wanong tingorun ewe aninisin moni an federal ren ekkewe neni non unusen ei state an epwe anisi ekkewe program an CIC me pwan an epwe tufich touren pworous fengeno nefinen ekkewe kinikin. Mwonien aninis seni federal fan iten ewe CIC epwe pachenong, awewe chok, pekin aninis ren technical an epwe anisi ewe CIC non met ar angang ika anisi ar repwe angang fengen non unusen ewe CIC me pwan ekkoch kinikin mei wewe ngeni. Non an ewe CIC mei angang fengen me ekkewe kinikin non pusin ekkewe neni, epwe pwan tongeni menei an epwe wor ew system non unusen ei state epwe anisi ekkewe community ren ar repwe nenengeni ewe angangen pekin health ese nonnopok me nukun ewe program an CIC.

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<sup>9</sup> Minafeon 1115(a) mummutan epwe wor ekiesiwini angang ekkewe medicaid in fitu states, ussun North Carolina me Massachusetts, pachenong annisin mwoni fan iten kaworen angangen management system me ekkewe program fiti fengen me aninisin imw fan iten ekkewe putain social services mi nom non ekkewe community ir mi angang fengen me health care. A case study fan iten community-based organization ir mi fifiti ewe New York's DSRIP program e pwarata "building capacity" ika angangen epwe wor om sinei, kae, sou emmwun me ekkewe ekkoch wewe ina kian epwe pwung pwan nennepek an meinisin repwe fengngino. *Katon en Achieving Health Equity and Wellness for Medicaid Populations: A Case Study of Community-Based Organization (CBO) Engagement in the Delivery System Reform Incentive Payment (DSRIP) Program*, [https://academyhealth.org/sites/default/files/achieving\\_health\\_equity\\_medicaid\\_cbos\\_april2019.pdf](https://academyhealth.org/sites/default/files/achieving_health_equity_medicaid_cbos_april2019.pdf)

## 2. Mwonien aninis an federal ren ekkewe angangen pekin health ese nonnopok me non ekkewe kinikin mei omwokut meren community non unusen ei state

### a. An ekkewe CCO monien aninis non ekkewe community epwe kawor ngeni an epwe fis pwe ina met angangen pekin safei me pwan ekkoch sokkun met ra nounou ngeni mei namwot ngeni ewe aninis

Nupwen ekkewe CIC ra forata ekkewe neni mei namwot ngeni an epwe nounou ewe mwonien aninis, repwe pusin tumwunuw nounou ewe monien aninis me non an ekkewe CCO kewe community (meren HB 3353). Ussun sia fen pworous won ewe *Value-based Global Budgets* taropwen pworousan, ekewe CCO me Oregon ir mi tongeni nounou ewe moni ngeni aninisin an epwe ochuno health me ekewe mettoch e anisi ach health me non ekewe nenien aninis (HRS) me ewe Aninisin Health fan iten Meininis ren ewe angangen Anisisefani: ren ewe SHARE Initiative.<sup>10</sup> Nge, moni mi kawor ngeni HRS mi chok kukun (0.7% napengeni), epwe fokkun ochuna nonomwun health ika pwe e wesen watte aninis ngeni ekkei sokkun angang. Ussun a fen affat me non pworousan iwe, ewe HB 3353 mei aucheani an OHA epwe kutta an epwe ketiwe me ren ekkewe CMS ewe 3% me non ewe value-based global budget an CCO ngeni an epwe eochueno ewe angangen pekin health ese nonnopok me an epwe fori pwe angangen pekin safei me namwotan epwe eochuno ren met epwe kamo ngeni.

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<sup>10</sup> Ewe SHARE Initiatives a etto seni an ewe Anepwung kewe requirement ren ekkewe pekin aninnis fan iten aramas ren ar peirakin safei non pioing me ekkewe ekkoch sokkun aninnis. Ekkei nenien aniinis repwe angei manawen neur kewe mwonien aniinnis pwan eniwini enong non ar kewe community. Murin ar ra menemeneoch ren pwungun òkòòten neuneun senis, CCOs ra tongeni neuni ekis neur ewe senis ika eimuno eoch fan iten angangen ewe health inequities me ekkewe popun ese nènnpèk inetin aramas ar ren ekkewe aninnisin ar repwe tufichin pochokkun, nonnomweuch me nipwàkeoch. Ren sopwosopwun porousan, no ngeni ei <https://www.oregon.gov/oha/HPA/dsi-tc/Pages/SHARE.aspx>

### 3. Mwutata ngeni ekkewe angang an community ar ekkewe aninisin nongonong epwe awora aninis won epwe nonnopokun angangen pekin health

- a. Oregon mei wanong tingorun ngeni ewe muun federal an epwe kawor ew sokkun aninis ren ewe angangen pekin health ese nonnopok (HEI)—rem mwonien aninis mei foruta fan iten ewe CIC an epwe tongeni pusin tumwunuw ewe angang non unusen ei state.

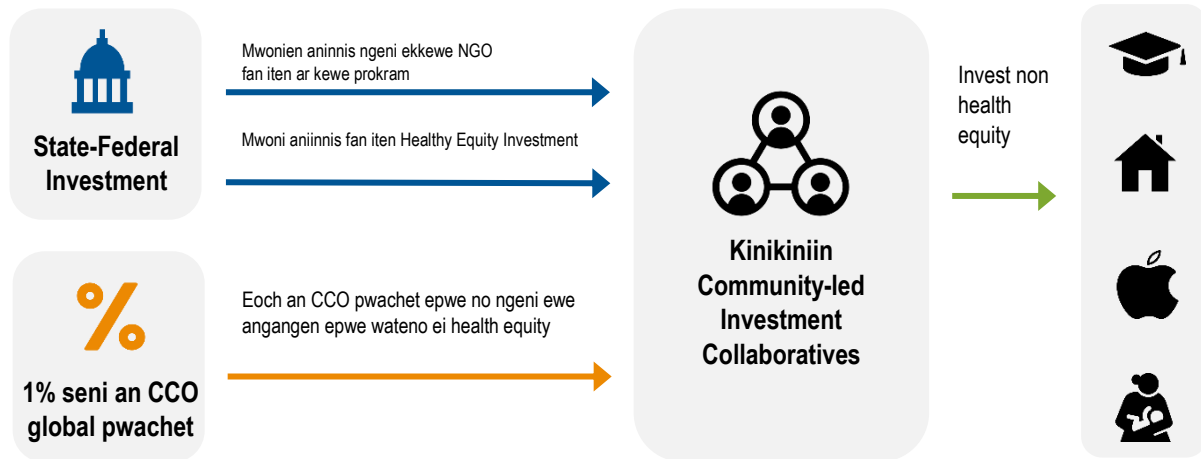
Ren ennetin, ewe angangen ewe aninis esapw wor ar repwe ekkemis fengen won, mei kouk ngeni chok ukukun chon repwe nounou, ika mei tichikitiw non met sokkun itenapen angang repwe angang fan itan. Mwonien aninis ren HEI epwe tongeni mwut ngeni ekkewe CIC mei tufich ngeni ar repwe sopweno ne awora ar angangen aninis won metekewe angangen pekin health ese nonnopok ewe mei fis osupwangan won ekkewe chon nounou Medicaid me ar kewe famini.

Ekkewe tingorun aninis ren HEI repwe afatano ekkewe chochon aramas repwe tongeni angang ngenir me pwan kokkotun ifan usun angangen aninis, ir me ruw repwe esinesin meren ekkewe community me ekkewe mettoch mei nomw non kokkot fan iten ewe community health assessment/community health improvement.<sup>11</sup> Awewen ren met ekkewe tungor mi katonong fan itan an epwe chomongeno chon anganga fan iten aninnisin imw me fan iten aniinisin imw; awatenoi ekkewe neni mi epwuk sipa me ira ie pun epwe echuno non ewe neni me ferutiw; awatenoi ekkewe angang mi anisi ar aramas osukosuken non mekurer me ar nonnom; katanoon kopwut me angang mi ngaw ngeni ekkewe aramas rese pwechepwech, ussun ekkoch angang fan iten osukunen ekkewe eoreni mi sakopat; me/ika meon nenien tumunun semirit epwe mekukkun. Pwan sopwusopwun, a anongonong won met kewe mi auchea meren ekkewe pinùükun aramas, HEIs epwe katoneoch met ekkewe pekin aninisin epwe anisi ngeni aramas repwe nonnomeoch, kinamwe, me nipwakeoch awin fan iten ekewe semirit me inepwinew pwan asainon ekkewe ir mi nomw non ewe kinikin priority population (semirit, chinnap, inenap mi pwapwo, veterans, me ekkewe ekkoch). Ach mwut ngeni CICs an epwe invest non kewe fitu kinikinin aninnisin ir auchea, aninnisin mwoni seni HEI epwe aora ekkewe putai fan iten ekkewe chochon aramas ar repwe tufich me nipwaekech non ar nonnom. (Katon Appendix A ren sopusopun poraus fan iten HB 3353, CICs me HEI grants.)

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<sup>11</sup> Kapach unuseochun me watten data ren pekin ir chochon ian, ar poraus, mwèk, ion mi wor ewe memmefin afich (mwan-ngeni fefin, fefin ngeni fefin, me ekkewe ekkoch), ir met, me ekkewe ekkoch data mi affatatiw an aramas keukun sukun, angang me ekkewe ekkoch wewe; pwan data mi etto seni ekkewe putai ir re anganga osupwangan aramas ren ikenai me nesor.

**An Oregon ewe anapanap epwe ussun ewe Community Investment Collaboratives fan iten epwe wor fitu kinikinin ika aneen mwonien aninnis.\***



\*Fiti fengen me ekkewe investment seni state me CCOs, ew me ew kewe kinikin Community-led Investment Collaboratives ir mi tongeni neuneu ekkewe ekkeoch aninnisin mwoni fan iten health system, ussun ewe mwonien hospital community benefit, me chon niffangeto mwoni fan iten angangen health equity non ekkewe communities.

**c. Aninisin mwoni ika om fansoun ngeni ekkewe angang health equity non unusen state**

Sopwusopwun aniinnisin mwoni ngeni aramasen ewe community ir pusin ra anganga an epwe kukununo an ar uwe community osupwang me nipwàkingaw, Oregon a tungor pun unusen non Oregon epwe aora ekkei sokkun aniinnis epwe fokkun watte fan iten health equity. Ren awewe, ussun met a fen affatetiwi non ewe taropwe mi awewefichi eucheane ewe tungorun aniinis seni *Improving Health Outcomes seni Streamlining Life and Coverage Transition* Oregon mi tungor ewe anninisin senis seni federal an epwe neuneu ngeni angangen ekkesiwinin non OHP an epwe anisi eochu aramas fansoun a wor katanòn neur aninnisin health insurance me fansoun a wor ekkewisin non ar nonnom. Ewe mochen fan iten epwe wor popporaus fan iten an Medicaid mi chok eukuku met epwe tongeni aninnis won; an epwe atamano met epwe tongeni aninnis won ren ewe fansoun mi keuk non; an epwe pwan affata met sokkun pekin anninis fansoun a tori an epwene wor akkasiwin (ren awewe, semirit mi nom fan tumunun kofemen an tori ierin an epwene tou seni ekkewe chon tumunu) ika ekkewe osukosuken fenufan (awewe., kkar won fenu, pwichiikkar). Akomw, Oregon epwe nengeni ika tumwunun health mei kawor ngeni ese nifinifin



ika re kuna pwe mei wor chon esinesin pwe rese pwapwaiti, rese tufichin angei och aninnis, fengen me ika ese wor tumwuneoch pokiten chok ir mei osupwang.

## **Met wewen ekkei ennuke ngeni ekkewe chon nounou OHP**

Chon masowen OHP ion mi pin fis ngeni injustice, repwe wisen fiti anapanapen ika forutan ekkoch program me non ach kewe kinikin.

Auchean ei ekiek fan iten chon masowen non OHP me pwan chon masowen pwan ekkoch group ir mi pin fis ngenir injustice repwe kuna tufich ren aninisin inis seni ei community-led health equity interventions. Mokutukutun ei ekiek epwe napeseni angangen aninis non ach kewe kinikin me fiti angangen foforon kaworen aninis. Auchean pwe epwe epwe appochokuna ach kewe kinikin, anapano anisin health ngeni ach kewe kinikin iwe pwan awesano weiresin aninisin health.

## Appendix A

# Oregon House Bill 3353 (2021)

An epwe wor ekkesiwin mi auchea esapw etto seni chok mefien ekkewe CCO me ar kewe anapanap – mi auchea an epwe wor memmef epwe katonong àkàwin seni ekkewe community me epwe pwan etto seni ekkewe ir chon angang *ngeni* ekkewe aramas mi kùng, chon, (minorities) me ekkewe aramas mi chok sin me nomw pun ese wor ekkewe aninisin ar repwe fengino non manawer an epwe tufichin wor ewe ew minafen anapanap. Iwe pwan sopwonon, anapanapen ewe Oregon 1115(a) demonstration waiver renewal mi foruta seni an ach kewe kinikin achocho ne aninis fengen.

### Uruon

Non ewe July 2011, OHA a efisita ewe angang itan Regional Health Equity Coalition (RHEC). Chon RHEC ir sou emwen ra pesei ngeni sokkopaten choochon aramas ar repwe pwapwaiti ne ekieki, wanong ar memmef, me aniinis ren angangen ewe ras an epwe keukutiw ekkewe angang mi ngaw mi esenipato nipwakingawen angang an esapw wor ekichu ren tufichin me fenginon manawen aramas non Oregon. Chon RHEC re wisen kutta ekewe osukosuken nafangaw ika kirikiringawen aninisin health me non ach kewe state ir pwan chon kutta popun me wewen a wor ekewe sokkun kirikiringaw pwe repwe tongeni kutta anen ekesiwin akkaewin me non annuk, system me pwan chon menun unukuch. Ew suukun an repwe angang mi apachanong aninnis ngeni ekkewe community mi sakopat aramasan pun repwe tufichin nipwakeoch ne angang ngeni ekkewe chon epwunganoi mettoch, CCOs, me ekkewe ekkoch health systems ar repwe popporaus ren ekkewe pekin aninnis seni pioing ika aninnisin an aramas repwe pochokun mi keuk repwe poraus fengen ren popun me ren ewe nefenun policy, systems me environmental pun epwe kisino ekkewe popun ekkewe angang mi ngaw pun emen me emen aramas fiti fengen famini repwe tongei chikar me pochokun.

*lei pwe onu RHEC a wor non 11 counties me non Oregon me nukun ekewe 36 counties me Confederated Tribes seni Warm Springs. Non 2021, ewe Anepwung non Oregon ra passini Senate Bill 70 minne epwe awora 4 sokku aninnis ngeni RHEC, ach anean pwe epwe napeno ei aninis ngeni unusan ei state non kan ier mwach.*

Chon RHEC re churi OHA fan iten ew tingor ren ewe 1115(a) demonstration waiver renewal iwe ra angang fengen ngeni ewe legislature ar repwe aronga ngenir napanapen ewe HB 3353. Sopotoponon, meinapen OHA me RHEC ra efisita ewe Community Management Funds workgroup ar repwe anganga masowen ewe HB 3353 pwan masowen ewe 1115(a) demonstration waiver renewal iwe pwan aweteno ekkewe kaoren ekkewe wis ngeni ekewe aramas mi mefi ar weires me non ekewe kinikin ar repwe afata

ekewe nipwakingaw me wisen neuneun ekewe monien aninnis fan iten ekewe osupwang me non nenier.<sup>12</sup>

### (HB 3353)

Usun aporous mi affatetiw non ewe taropwen *Value-Based Global Budgets* chon Oregon CCOs ir mi tongeni nounou ngeni neur kewe moni aninisin an epwe ochuno pekin health me ekewe mettoch e anisi ach health me non ekewe nenien aninis (HRS) me angang fan nurun SHARE.<sup>13</sup> Nge, moni mi kawor ngen HRS mi chok kukun (0.7% napengeni), epwe fokkun ochuna nonomwun health ika pwe e wesen watte aninis ngeni ekkei sokkun angang. Non ewe Bill, a mochen an OHA repwe kutta mwumwuta seni CMS pwe 3% mwonien an CCO value-based epwe no ngeni aninisin health nge repwe nom non iten met ekewe pisekin medical mi auchea ar repwe mèni.

Nepoputan ewe 2020, chon RHEC me Oregon ra angang fengen me ekewe CCO me legislature ar repwe forata HB3353, iwe mwurin a pass me non legislature non 2021 ren ukukun 90% chon etipe ew. Auchean Masowen ei ennuke mi keran katonong:

- Mwaren 3% seni an CCO's ewe pwachetin global epwe no ngeni aniinisin health equity, me popun epwe wor murinènon health, me osukunen ekewe eoreni mi konò akawin ekkei chochoon aramas mei non ewe kinikinin priority population pachenong ekkan tiu Einang an Oregon Federal kofemen mi esinna ar cho me tettenin einang; pwan chon Latino/a/x, Mi chònòchòn/Afrika-Amerikan, chon Saini (Asia), chon fonuwen non Pasifik, me chon winipwos Intian/Alaska, me pwan ekkoch aramas rese pwechepwech; aramas mei mwèk; aramas rese kon sinei fosun Merika, me chon etto nonom Merika me chon su seni fonuwar fan iten mwaun me manaw ariaffou.
- Aweteno accountability ngeni ekewe kinikin me pwan chon tumwunun nounoun mwoni.

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<sup>12</sup> Ewe OHA/RHEC workgroup re mwiich fan 12 nefinen ewe May me July 2021 ar repwe forata met sokkun ar omwokut epwe tongeni anisi ngenir anapanapen ar repwe ekkesiwini pochokunen nemenem me aninisin nongonong ngeni community. Ach apareni pwe ewe nikinikin angang mei auchea usun pwan euechan uwaan ewe angang, ewe angang mei pachenong ar repwe forata angangen nukunuk nefiner, akkaewin ar repwe fori pwe epwe napeno nukunuk nefinen ekewe organization non community me mwuun, afatano ekkoch mettoch mei auchea mei wor rech non ach fori angang fengen ren an epwe wor etipeew nefinen ekewe mwiich, aninis fengen won met mei menei epwe fis pwe epwe tufichin pwonueta ewe angang fengen, afataeochu wiisen me kookun angang, me pwan tipeew fengen won met kewe sokkun ourour epwe fis pwe ina met ewe anapanapen angang epwe fis fan itan ren an epwe pwonueta angang epwe nonnopok, pachenong aninis epwe wor fan iten ekewe community ir mei kuna aninisingaw pwokiten seni ian re feito seni ian me ar eoreni.

<sup>13</sup> Ibid. Footnote 10.

- fiti fengen me data mi watte me murinnè ren ekkewe REALD, SOGI me ekkoch data seni census mi affata ierin aramas, ir chon ian, ar angang me ekkewe ekkoch wewe; data mi pwan etto seni ekkewe chon angang osupwangen fan iten community ir mi affata ar naffangaw won ikena me penoon.

### Kawor en: Nemenem

Fofforun angangen non en HB 3353, Oregon a mochen efietà eoch ruu nefenun chon masamas won neun CCO mwonien health equity:

Chon **noun state oversight committee**, mi kepunguno meren HB 3353, epwe wor chonchon aramas epwe tupwuni ewe regional me demographic diversity seni ei state epwe anongonong won pisekin pwarata mi kawor meren ewe mi watte wisen chon ion epwe no ngeni aniinis meren pioing me emen epwe tupwuni ekkewe tiu einangen intian ir mi sin meren federal ika fen seni ewe urban indian health programs."<sup>14</sup> Ewe state-level oversight committee ii epwe wisen chon afisieta ekkewe criteria fan iten ekkewe wewe mi affat an epwe tongeni neuneu ewe senis fan itan me eureur won ew Request for Proposals (RFP) fan iten Community Investment Collaboratives, pwungunon ekkewe osukusok, 15 me met kewe re nennengeni.

### Me nukun investments seni state me CCOs, ekkewe Community-led Investment

**Collaboratives** seni ekkewe neni ika kinikinin ir mi tongeni neuneu ekkewe annininis mwoni seni pioing, neun pioing kewe aninnisin mwoni fan iten ekkewe mi osupwang, neur tokter me ekkewe ekkoch putai kapach fiti fengen me ekkewe senis an aramas niffang fan iten health equity. Ew me ew CIC epwe finata emen neur sou emwen, community council, me chon emen maneecher chon makkei porausen neuneun mwoni. (Emen me emen kei mi wor wisen mi tongeni wiseni fitu sekinin wis.)

CIC epwe pwusin etto seni ekkewe chochon aramas iwe repwe pwan pwisin aea met ekkewe mi wor me non ar kewe community ussun RHECs me CCO health councils ika pun ewe oversight committee me OHA repwe mi mut ngenir. An epwe wor ewe auchean ekesiwin chon emwmwen me nemenem, Oregon epwe awora ekkewe tetten me wewen ekkewe chon emwen repwe anganga me emweni ekkewe mwichen aramas ir mi nom non ewe kinikin priority populations<sup>16</sup>

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<sup>14</sup> Ibid. Footnote 2.

<sup>15</sup> Pesepes seni HB 3353, ewe committee e wisen masamas wisan epwe chon atawei ekkewe osukusok nefinen OHA me CCOs an epwe epwungueno met ekkei putai mi tongeni neuneu ngeni neur mwoni.

<sup>16</sup> Ekkei aramas mei pachenong ekkon Einang an chon Intian me ar tettenin Einang; chon Latino/a/x, Mi chònòchòn/Afrika-Amerikan, chon Saini(Asia), chon fonuwan non Pasifik, me chon Intian/Alaska, me pwan ekkoch aramas rese pwechepwech; aramas mei mwèk; aramas rese kon sinei fosun Merika, me chon etto nonom Merika me chon su seni fonuwar fan iten mwaun me manaw ariaffou.

ekewe ir mi mefi watten ei health inequities. Fan iten ekewe agencies me organizations ir re angang ngeni ekewe aramas rekon chommong me wèweoch ir ekewe repwe pwan sopweno ewe angangen kefin me eimwumwu fan iten met fèffèr a fen fis me nomw pwan tori ikenai an epwe epeeti an aramas repwe fengngino, ekkei putai nom non tettenin chok chon aniinnis nge esapw ir minne repwe chon epwunganoi me masamas won met ekewe ewe an ekewe community angang ar repwe tufichin fengino nesor me pennon. lei popun, CCOs ir repwe angang fengen me CICs, nge CCOs me health systems partners resapw tufichin an repwe wisen chon nemenem. Non neun RHEC we anapanap, mi awora ekewe nikinik an epwe èpèchèkuna ngeni RHECs epwe mwut ngeni ekewe sakopaten aramas non ar community ir minne rese pwechepwech ar repwe wisen masamas me popporaus.

CICs epwe awora ekkech ennuke me nukkun ekewe ionapan ennuke fan iten neuneun ekewe mwoni non ew me ew region fan iten tumunun nonomun aramas; pachenong Kokotun Eochun Mamaritan Tumunun Aramas seni ewe CACs; me tumunun an epwe katonong ren ewe CCO's 3% an epwe nounou won met epwe kawor ren mokutun tumunun nonomun aramas non ar kewe community.

Non ach nenengeni ekkei mettoch minne mei forata an esapw wor nonnopokun angangen pekin health ewe mei fis fan iten epwe cheche ekewe mei pwech ina met ei minafon omwokut ren ewe pekin health, RHEC, me pwan ekewe community mei wor ar organization (CBO), pachenong ewe pekin social service me pwan ekewe tichikin organization mei wor ren pekin eoreni, ikena met a fen piin fis pwe epwe anisi an esapw napeno angangen pekin health ese nonnopok me pwan nenengeni usun nonomwun aramas ren pekin health. CIC epwe need aninnis fan iten mèèm ewe angangen kутten cheon angang me trainin chon angang, fèrun or aninnis an epwe murinnè no ewe community council, kaworen ewe ewin etipew nefinen ewe sou amwen me maniicher chon makkei me neuneun ewe aniinisin senis, kaworen atipeew ngeni ekewe CCOs, me keeun imw me ekewe pisekin information technology an epwe anisi ngeni an epwe tufich met ekewe repwe anganga. Ussun met a fen anapanap non ewe taropwe mi affatetiwe ekewe tichiikin me eauchean poraus, CICs epwe wor an fansoun an epwe apply ngeni ekewe mwonien aninnis fan iten neur mweno repwe tufichin fèri ar angang me ar kewe program re mesemes won. Nupwen CICs a fèrutiw, ra tongeni tufichin neuneun ekewe mwonien aninnis fan iten angangen kut chon neur chon angang, trainini neur chon angang me mwonien ar epwe tufich me pwenuta ar kewe angang, anninis non ewe ras epwe tuputo seni OHA, me kутten menni nein ekewe "Health Equity Investment" epwe kon murinnè ika nap fan iten epwe murinnèno ewe angangen health equity non ar kewe community.

## Kefisin ika angangen: Neuneun mwoni

Oregan a ekiekieta an epwe fèri unungat watten nikinikin neuneun mwoni an epwe apachanong ekkewe tettenin sokkun pisek ewe senis epwe neuneu ngeni mi affat non HB 3353:

1. **30% ren ewe 3%** (~1% an CCO global pwachet) epwe no ngeni ekan prokram me aninnisin kaworen anonnopokun tumwunun health ngeni aramasen nukun, ar eoreni me ekan aramas re tufichingaw. Ekkei aniinnisin mwoni fan iten ekkei community mi osupwpwang epwe no ngeni CICs.
2. Fan ennukun CCOs pun epwe angei mwaren **20% seni ewe 3%** (~0.6 seni global pwachet) epwe ngeni **mwonien niwin ekkewe chon angangen pioing** fan iten ekkewe mi wor ar osukosuken non mekurer me manawer, osukunen sipwe weweiti fengen ekkewe eoreni mi sokopat, me tokter chon aora peer-based services (ussun chon angangen non public health ir mi angang fan nurun emen neur tokter).
3. **Nussun mwoni** fan ewe 3% epwe **neuneu ngeni met an ewe community need** mi pwan tongeni no ngeni ew chok nein ekkewe unungat sokkun mwonien aniinnis fan iten angangen an epwe nènnpèk pekin health: ekkewe aninnis fan iten emen me emen choochon ewe OHP, sopwusopwun aninnis ngeni ewe community, ika sopwusopwun niwinin ewe tokter.

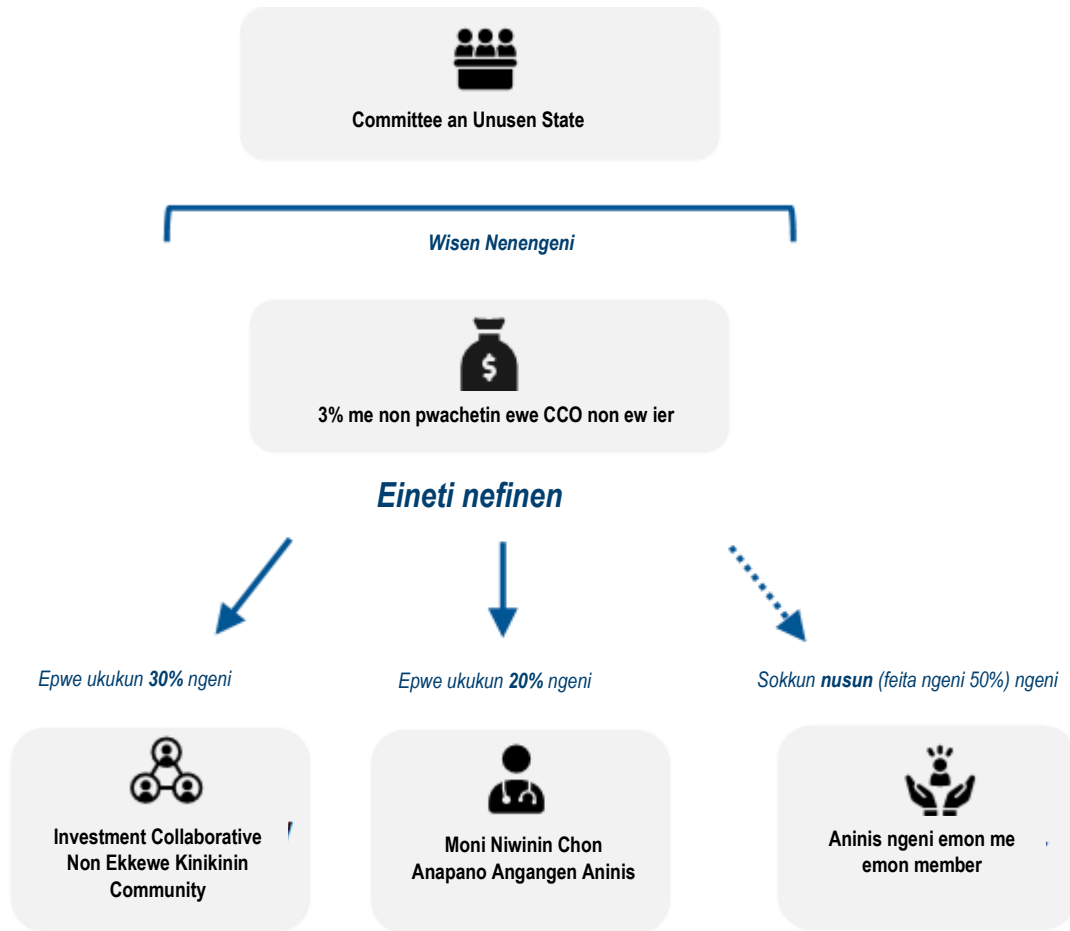


Figure 2:

### Kaworen: Angang

**Ewin kinikin:** Ewe Statewide Oversight Committee mi fèruta meren HB 3353 epwe aora an CIC ekkewe napanapen ennu ar angang epwe fiti ngeni me eureura OHA won ar request ren poraus (RFI) fan iten menni nein ekkewe community e mochen an repwe angang fengen me CICs.

Pesepeser kewe ika ennu kur kewe epwe afata:

- Ekkewe tettenin met repwe feri ren ekkewe organizations ren CICs, epwe pachenong nge ese wor keukun ren: epwe wor chon tupwuni ekkewe groupen sakopaten aramas seni ekkewe local communities, pachenong ekkewe ir mi angang fengen ren RHECs, ekkewe CBO ir mi affateti



ren ar angang ngeni pekin eoreni, CCO health councils, ika ekkewe ekkoch communities; CCOs me Community Advisory Councils; local pioing; me local public health authorities;

- Ewe a emweni ewe organization ren CIC epwe tupuni, angang fan iten me akomwa met mei auchea fan iten ew mwichen aramas, pachenong, nge ese kauk seni, an Oregon kewe tiu tribes mei fat meren federal me pwan ekkewe Tribal community; Latino/a/x/, Black/African American, Asian, Pacific Islander, me American Indian/Alaska Native me ekkoch pwan community mei kono enuwen unucher seni ekkewe mei pwech; ekkewe mei wor terir; ekkewe aramas rese kon sinei fosun Merika; me immigrant me ekkewe remi su seni fonuwer fan iten riafou;
- CICs epwe achocho ngeni an epwe feri wisan non unusen en ier (epwe pwan wor aninnis seni ekkewe mwoni mi wor fan iten sopwusopwun chon angang pun epwe tawe fich ewe ras); me
- Keukun me fan ewe nenen mwoni aninnis mi tongeni request fan iten angangen ekkewe pekin sopwusopwun aninnis pun ewe ras epwe tawefich, me mwonien anninin HEI (katon fan).

Ewe RFI epwe awora poraus fan iten:

- Meni community mei aneanei epwe fori an CICs, ren kinikinin nenier me nonomun ewe neni;
- Meni nein ekkewe state mei tupu seni CICs, pachenong ika mwaren emon seni ewe me ewe ekkewe CCO non ekkewe neni ika ew ekkewe CICs mei chok akeke fengen; me
- Ina mwo ika OHA mei ekieki epwe fori ew angangen tour ngeni an epwe anisi ewe CIC ren forutan me mokutun. Ren awewe, ika pwe RFI e pwari nge ekkewe CICs a chok nènèfèngen ar kewe angang, iwe OHA ina epwene erenir ir ekkewe CICs repwene chok angang fengen ika kochuu ika fen epwene fini menni nein kewe CIC epwe fini. Met mi kono, ika pwe RFI e pwarata pun ekkoch CCO regions ese wor ar CIC, OHA fiti fengen me HB 3353 Statewide Oversight Committee, ir mi tongeni wanong ar memmef non ewe ekkewe aramas poporaus fengen pun epwe fèruta ew CIC.

**Stage 2:** CICs mei tongeni apply ngen ekkach capacity-building grant, minne-ka epwe:

- Mwonien aniinnis fan iten ekkewe angangen kутten, katonongen me trainin chon angang, meon ekkewe peirakin angang epwe awatenoi nipwakeoch me ekkewe aramas chon etto me nukun fenuwach an repwe anisi ne emwekutu ewe angang fan iten an CICs kewe angangen repwe efisatai ar ewe CBO network me aora sou emwen me nein ekkewe chochon aramas non ewe neni;
- Mwonien aniinnis fan iten ekkewe pisek an epwe tourech poraus/taropwe nefinen ekkewe putain non pioing ngeni ekkewe putain chon anisi aramas ren ar osupwupwang; pwan/ika
- Kaworen ekkewe kapacheton aniinnis pun epwe fengino ar angang me pisekin angang ar repwe keu imw fan iten CIC pun repwe tongeni angei ekkewe aniinnis fan iten administer CCO,

annisinin mwoni fan iten Health Equity Investment, me ekkoch aninnis mwoni seni ekkoch putai (e.g., aninnis fan iten ekkewe communitiin seni pioing, ekkoch anninis meren kofemen, ika aramas chon niffangeto mwoni).

**Kinikinin 3:** CICs mi tongeni apply ngeni ekkewe aninnis fan iten ewe angangen an epwe nennepek ngeni aramas meinisin ewe pekin health ika Health Equity Investment (HEI), iwe CIC epwe neuneu ngeni ekkewe angang chon ewe pusin community repwe kutta kewe wewen ese nennepek inetin aramas ren ei aniinisin seni pioing, safei, iwe ra anganga pun epwe wor eochuno.

Ekkewe tingorun aninis ren HEI repwe afatano ekkewe chochon aramas repwe tongeni angang ngenir me pwan kokkotun ifan usun angangen aninis, ir me ruw repwe esinesin meren ekkewe community me ekkewe mettoch mei nomw non kokkot fan iten ewe community health assessment/community health improvement.<sup>17</sup> Fitu awewe ren met katonongen tungor un anninis meren HEIs an epwe wateno aninnisin imw epwe kawor me ekkewe sakopaten aniinnis; amwirinèèn nenien asèèse me kukunou mi epwuk sipaa me ira; awateno kaworen ekkewe aninnis fan iten ekkewe osukosuken aramas me osukosuken non ekiék; katanoon ekkewe angang mi ngaw ngeni ekkewe rese pwechepwech, ussun angang epwe wateno fan iten osukunen ekkewe eoreni mi sokopat; me/ika nenien tumunun semirit epwe mèkùükùn. Pwan sopwusopwun, a anongonong won met kewe mi auchea meren ekkewe pinùükun aramas, HEIs epwe katoneoch met ekkewe pekin aninisin epwe anisi ngeni aramas repwe nonnomeoch, kinamwe, me nipwakeoch awin fan iten ekewe semirit me inepwinew pwan asainon ekkewe ir mi nomw non ewe kinikin priority population (semirit, chinnap, inenap mi pwopwo, veterans, me ekkewe ekkoch). Ach mwut ngeni CICs an epwe invest non kewe fitu kinikinin aninnis ir auchea, aninnisin mwoni seni HEI epwe aora ekkewe putai fan iten ekkewe chochon aramas ar repwe tufich me nipwaekech non ar nonnom.

Ren awewe, ar repwe poraus fan iten ekkewe popun me wewen climate change a fis, ngeni ekkoch aramasen non Oregon epwe kon auchea ngenir. Climate change—ew watten popun ewe minafen sokkun kkar non ewe 2020 non Oregon atun ewe fansoun ekkach kkar iran me fetin me ewe fansoun anonineni keukun pwichikkar non 2021—nape ngeni ekon watte taan ika ariaffoun ngeni ekkewe

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<sup>17</sup> Kapachanenong murinèèn me chomongun data ussun REALD, SOGI, me ekkewe data mi etto seni census ren ian aramas re angang ian, keukun sukun, chon ian, pwan data mi etto seni ekkewe tes mi fan iten epwe affat ika met an ewe community need ikenai me nesor.

community esapw ir mi pwech fan iten nikinikin nenier me imwer mi keumwuno<sup>18</sup> seni ekkewe nenien aramas mi pwech,<sup>19</sup> me ekkewe ekkoch wewe. Ewe kkar non fenuwen Oregon non ewe 2020 mi ataieno ekkewe communities non unusen ewe state, pachenong Talent me Phoenix, ikkewe ie mi wor 90% Latino/a/x. Awatenon ekkewe neni mi pwuk sipa me ira an epwe emwirineu ew environment ussun ewe climate resilient housing, mi tufichin an epwe aechuneno ngawen climate change. Sopwusopwun, ewe pisekin pwarata mi pache ngeni ewe kunokun om nonnom nukun fansoun ese wor osukosuken non om ekiek me ach nonnom fengen aramas non kinamwe me tipew mi auchea.<sup>20</sup>

Katoneoch pun esapw wor anen ar repwe sine ekkewe nampan HEI grants; epwe anongonong won CIC me keukun ar apply me nennen ewe mwoni mi wor. Ar mwonien aninnis epwe mi wor pisekin ar repw katon fich ussun ekkewe occupational practices repwe aea scientific evidence ika pisekin pwarata seni community, epwe focus won mwekutun ewe community ussun ewe community based participatory Research (CBPR), me ian chok a fich. CBPR mi nofit chon research me community engaging non ar repwe echiechi non unusen angang ei research mi pwan esenipato an epwe fisioch ioin data me chiaku ewe data fansoun ar poporaus fan iten murineen community health me health ese nennepek.<sup>21</sup>

En mei tongeni angei ei taropwe non fosun fonuwomw, echo mei mesemmong makkan, makken braille ika met uchok ka finieta ren eoch sokkun napanap epwe mak. Atoura mefiom ngeni ewe Community Partner Outreach Prokram ikei [community.outreach@dhsosha.state.or.us](mailto:community.outreach@dhsosha.state.or.us) ika kokkorir won nampa 1-833-647-3678. Kich mei etiwa meinisin chon koko, en mei pwan tongeni kokori 711.

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**18 Katon ei Jesdale BM, Morello-Frosch R, Cushing L. 2013. Kkar ika ekkei mi kenieno fènuwen ekkewe chòòchòn aramas enuwen winikindir rese pwech, e nap mwen ekkewe mi pwechepwech fan iten mi wor kinimumun nenien ekkei mi pwech seni ekkewe aramas mi konò enuwer. Environ Health Perspect 121(7):811–817, PMID: 23694846, 10.1289/ehp.1205919. [Link](#), [Google Scholar](#) ; Davies IP, Haugo RD, Robertson JC, Levin PS (2018) The unequal vulnerability of communities of color to wildfire. PLoS ONE 13(11): e0205825. <https://doi.org/10.1371/journal.pone.0205825>**

<sup>19</sup> Contribution of four comorbid conditions to racial/ethnic disparities in mortality risk. **American Journal of Preventive Medicine.** 52(1) supplement 1: S95-S102. [https://www.ajpmonline.org/article/S0749-3797\(16\)30322-1/fulltext](https://www.ajpmonline.org/article/S0749-3797(16)30322-1/fulltext)

<sup>20</sup> <https://willamettepartnership.org/wpcontent/uploads/2014/06/HealthFramework-Final-Reduced.pdf>

<sup>21</sup> *Katon ei e.g.* Salimi Y., Shahandeh K., Malekafzali H., Loori N., Kheiltash A., Jamshidi E., Majdzadeh R. Is Community-based Participatory Research (CBPR) Useful? A Systematic Review on Papers in a Decade. *Int. J. Prev. Med.* 2012;3:386–393 <https://www.ahrq.gov/research/findings/factsheets/minority/cbprbrief/index.html>